OR

Declaration

Submitted

with Initial Filing

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

□ Declaration

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

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	Attorney Docket Num	her	MTB30US					
OR UTILITY OR	First Named Inventor	Kia Silverbrook						
LICATION	COMPLETE IF KNOWN							
1.63)	Application Number		/					
Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	Filing Date							
	Group Art Unit							
	Examiner Name							

required) As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled THERMAL INK JET PRINTHEAD WITH BUBBLE NUCLEATION OFFSET FROM INK SUPPLY PASSAGE the specification of which (Title of the Invention) \mathbf{v} is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or dany PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? Prior Foreign Application Foreign Filing Date **Priority** Country **Not Claimed** Number(s) (MM/DD/YYYY) YES NO Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION Iltility or Design Patent Application

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.															
U.S. Parent Application or PCT Parent Number						Pa	Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)				
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Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.															
As a named inventor, I hereby appoint the following registered practitioner and Trademark Office connected therewith: Customer Number OR					nber	Place Customer Number Bar Code									
Registered practitioner Registration Name Number					stration	name	/registrat	tion num	ber lis Nam		<u>w L</u>		stration mber		
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Additional	registere	d practitioner(s)	named o	on supp	lementa	ıl Registere	d Prac	titioner I	nformatio	on she	et PTO/	SB/020	C attached here	eto.	
Direct all correspondence to: X Customer Number or Bar Code Label 240					11	1 OR Correspondence address below						ress below			
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Country	Aust	ralia		Τ	elepho	ne 61-2	-981	9818-6633 Fax 6					1-2-9555-7762		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.															
Name of So	ole or F	First Invento	r:					A petitio	on has b	been	filed for	this u	ınsigned inve	entor	
Given Name (first and middle [if any])							Family Name or Surname								
KIA						SILVERBROOK									
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City		Balmain State NSW ZIF			ZIF	. 2	2041 Count				ntry	ry Australia			
Additional	Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto								hed hereto						